Durham Local Area Adult Data Validation Table of Contents

		Ref		WF+ Data Source Field	Verification Required (Yes, No)
Sec	Code	#	Data Element	Selection	
1	AE	1	Individual Identifier	SSN	Yes
1	AE	2	Date of Birth	Date	Yes
1	AE	3	Individual with a disability	Yes	
1	AE	4	Veteran Status	Yes	
1	AE	5	Employment status at registration	Employed	
1	AE	7	Low Income	Yes	
1	AE	8	TANF	Yes	
1	AE	9	GA, RCA, SSI	Yes	
2	AA	18	Date of WIA Title I-B registration	Dates	Yes
2	AXP	19	Date of WIA exit	Date	Yes
2	AA	21	Date of 1 st intensive activity	Enrollment	Yes
2	AA	22	Date of 1 st training activity	T-Activity	
4	AA	23	Established Individual Training Account	ITA >0 T-Activity	
2	AA	24	Adult education, basic skills and/or literacy	Activity enrollment	
			activity	-	
2	AA	25	On-the-job training	OJT activity	
2	AA	26	Occupational skills, skill upgrading/retraining, Workplace training	Activity Enrollment	
2	AXP	33	Employed in quarter after exit quarter	Supplemental data	
2	AXP	34	Source of supplemental data	Not in UI database	
2	AXP	35	Entered training related employment	"Yes"	
				(Job Referral Screen)	
2	AXP	36	Employed in 3 rd quarter after exit	Supplemental data	
2	AXP	37	Source of supplemental data	Not in UI Database	
2	AXP	45	Type of recognized educational/occupational	Yes	
			certificate/credential/diploma/degree attained	(Outcome Screen)	
2	AXP	46	Other reason for exit	Exclude	
				(Exit Program Screen)	

SECTION ONE

Eligibility/Data Validation

	Workforce Plus Intake Form (Signed and dated) (AE-5)
	Eligibility Documentation Social Security Card (AE-1) Date of Birth (AE-2) County of residence Citizenship Selective Service Registration
	Data Validation Documentation Individual with a disability (AE-3) Veteran Status (AE-4) Low-Income (AE-7) TANF (AE-8) GA, RCA, SSI (AE-9)
	EEO Statement (Signed and dated)
	Disclosure and Release Form (Signed and dated)
	WIA Participant's Responsibilities and General Information (Signed and dated)
	WIA Participant's Responsibilities Training Activities (Signed and dated)
*N	ote: All forms requiring signatures and dates must be originals.

SECTION TWO

Activities/Outcomes

WF+ Case Profile Screen ○ Date of WIA Exit (AXP-19)
WF+ Employment Plan Screen ○ Date of 1 st Intensive Service (AA-21) ○ Date of 1 st Training Service (AA-22) ○ Adult education, basic skill, and/or literacy act. (AA-24) ○ On-the-job training (AA-25) ○ Occupational skills or Skills upgrading/retraining, or Workplace Training (AA-26)
WF+ 1 st Activity Screen (Case Management) (AA-18) ote: 1 st Activity start and creation date and the WIA enrollment date must be the same.
WF+ Activity Notes Screen (AXP-19)
WF+ Case Notes Screen (AXP-19)
WF+ Job Referral Screen (AXP-35) (If training related employment is marked "Yes")
WF+ Leave program screen (AXP-46) (If reason for exit excludes participant from performance)
Outcomes Screen
Outcome Verification Documentation Outcome Verification Documentation WF+ 1 st Qtr Supplemental Data Screen (AXP-33) Document verifying employment in 1 st quarter after exit (AXP-34) WF+ 3 rd Qtr Supplemental Data Screen (AXP-36) Document verifying employment in 3 rd quarter after exit (AXP-37) Attainment of Educational or Occupational Certificate, Credential, Diploma, or Degree (AXP-45)
Exit Request
*Note: All documents will be printed and place in file after WIA exit.

SECTION THREE

Individual Employment Plan (IEP)

Individual Employment Plan (IEP)
Copy of Resume/Work History
JobLink Application
Service Needs Assessment
Skills Assessment
Basic Skills Assessment (ABLE, TABE, etc.)
Employability Assessment
Intake Procedure Checklist
Additional Forms/Information

SECTION FOUR

Training/Expenditure

Training Program Information o Acceptance Verification o Registration/Tuition Amount
Pell Grant Information and Process Form (Signed and dated)
WIA Training Cost Analysis O Copy of all ITA's issued (Signed and dated) (AA-23)
Participant Grades (if applicable)
Attendance Sheets
Textbook Info
Pell Grant Award Letter/Verification
Financial Award Analysis
Contractor Forms and/or Paperwork (non-WIA)